Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

 $\underline{http://lobbying disclosure.house.gov} \\ \underline{http://www.senate.gov/lobby}$

LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

| 1. Registrant Name Organization/Lobbying Firm Self Employed HOGAN & HARTSON LLP | Individual |
|--|---|
| 2. Address Check if different than previously reported COLUMBIA SQUARE City WASHINGTON State | Address2 |
| 3. Principal place of business (if different than line 2) City State | Zip Code - Country |
| 4a. Contact Name b. Telephone Number International Number (202) 637-5695 | c. E-mail 5. Senate ID# 18422-1002637 |
| 7. Client Name | ery 6. House ID# 304700495 |
| TYPE OF REPORT 8. Year 2008 Q1 (1/1 - 3/31) 9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report Termination Da INCOME OR EXPENSES - YOU MUST complete | te 11. No Lobbying Issue Activity |
| 12. Lobbying | 13. Organizations |
| INCOME relating to lobbying activities for this reporting period was: Less than \$5,000 \$5,000 or more | EXPENSE relating to lobbying activities for this reporting period were: Less than \$5,000 |
| Provide a good faith estimate, rounded to the nearest \$10,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client). | 14. REPORTING Check box to indicate expense accounting method. See instructions for description of options. ☐ Method A. Reporting amounts using LDA definitions only ☐ Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code ☐ Method C. Reporting amounts under section 162(e) of the Internal Revenue Code |
| Signature Filed Electronically | Date 07/21/2008 |
| Printed Name and Title Porter, John Edward , P | artner Page 1 of 3 |

| 15. General issue area code | BUD BUD | GET/APPROPRIAT | IONS | (one per page) | |
|---|------------------------------------|----------------------------|------|--|-----|
| 16. Specific lobbying issues | | | | | |
| _ | | _ | | needed officials of both the following objectives of the | |
| 17. House(s) of Congress and | d Federal agencies | ☐ Check if None | | | |
| | | | | | |
| 18. Name of each individual v First Name | who acted as a lobbyist Last Name | in this issue area | Cove | red Official Position (if applicable) | New |
| Г Г!: l4l- | Llalnarn | | | | ¬ I |
| E. Elizabeth | Halpern | | | | |
| | Gilliland | | | | |
| C. Michael | | | | | |
| C. Michael | Gilliland | | | | |
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| C. Michael | Gilliland | | | | |
| C. Michael | Gilliland | | | | |
| E. Elizabeth C. Michael John Edward 19. Interest of each foreign e | Gilliland Porter | sues listed on line 16 abo | ove | ✓ Check if None | |
| C. Michael John Edward | Gilliland Porter | sues listed on line 16 abo | ove | ✓ Check if None | |

HOGAN & HARTSON LLP Client Name American Association for Thoracic Surgery

Registrant

| 15. General issue area cod | le HCR HEAL | TH ISSUES | (one per page) | |
|--|--|--------------------|---|-----|
| 16. Specific lobbying issu | es | | | |
| • | | | d officials of both the legislative anng objectives of the Association. | ıd |
| 7. House(s) of Congress | and Federal agencies | ☐ Check if None | | |
| | | | | |
| | | | | |
| 18. Name of each individu | • | 1 | Covered Official Position (if applicable) | Nev |
| irst Name | al who acted as a lobbyist Last Name Gilliland | in this issue area | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael | Last Name | 1 | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael John Edward | Last Name Gilliland | 1 | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael John Edward | Last Name Gilliland Porter | 1 | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael John Edward | Last Name Gilliland Porter | 1 | Covered Official Position (if applicable) | Nev |
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| irst Name C. Michael John Edward | Last Name Gilliland Porter | 1 | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael John Edward | Last Name Gilliland Porter | 1 | Covered Official Position (if applicable) | Nev |
| 8. Name of each individualist Name C. Michael John Edward E. Elizabeth | Last Name Gilliland Porter | 1 | Covered Official Position (if applicable) | Nev |
| irst Name C. Michael John Edward E. Elizabeth | Last Name Gilliland Porter | Suffix | | Nev |
| irst Name C. Michael John Edward E. Elizabeth | Last Name Gilliland Porter Halpern | Suffix | | Nev |
| Irst Name C. Michael Iohn Edward E. Elizabeth | Last Name Gilliland Porter Halpern | Suffix | | Nev |
| irst Name C. Michael John Edward E. Elizabeth | Last Name Gilliland Porter Halpern | Suffix | | Nev |

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